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CENTRAL FAX CENTERNO. 8779

P. 1

OCT 0 2 2006

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TRANSMITTAL			Application Number		10/788,468			
FORM			Filing Date		March 1, 2004			
(to be used for all correspondence after initial filing)		First Named Inventor		Junichi YANAGIHARA				
			Group Art Unit		2816			
			Examiner Name	•	Kenneth B. Wells			
Total Number of Pages in This S	otal Number of Pages in This Submission		Attorney Docket Number		031948-9			
ENCLOSURES (check all that apply)								
Fee Attached Correction Cor		Drawing	ion and Power of Attorney g-related Papers to Convert to a Provisional		After Allowance Communication to Group Appeal Communication to Board of Appeals and Interferences Appeal Communication to Group (Appeal Notice, Appeal Brief, Reply Brief) Proprietary Information Status Letter Application Data Sheet Request for Corrected Filing Receipt with Enclosures A self-addressed prepaid postcard for acknowledging receipt Other Enclosure(s) (please identify below):			
			The Commissioner is h	aymeo	authorized to charge any additional fees ots to Deposit Account No. 19-2380 for the			
	SIGNATUR	E OF APPL	ÇANT, ATTORNEY, O	R AC	GENT			
Firm or Individual name Signature	Luan C. Do. Nixon Peab 401 9th Street Suite 900 Washington	ody LLP et, N.W. L. D.C. 2000						
CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)] I hereby certify that this correspondence is being: deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to: Mail Stop, Commissioner for Patents, P. O. Box 1450, Alexandria, VA 22313-1450 transmitted by facsimile on the date shown below to the United States Patent and Trademark Office at (571) 273-8300. October 2, 2006 Date Signature Michelle Duvall Typed or printed name								
	Typed or printed name							

Name (Print/Type)

Signature

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FEE TRANSMITTAL **FOR FY 2005**

Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$)500.00

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	Complete If Known	- CIVED
Application Number	10/788,468	CENTRAL FAX CENTER
Filing Date	03/01/2004	
First Named Inventor	Junichi YANAGIHARA	OCL D 2 2008
Examiner Name	Kenneth B. Wells	
Art Unit	2816	
Attorney Docket No.	031948-9	

Telephone

October 2, 2006

Date

METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)					
Check Crodit Card Money Other Nom	g 3. A	3. ADDITIONAL FEES					
Deposit Account:		Large Eatity Sm		Entity			
Deposit Account 19-2380 (031948-9)	Fee Code	Fee	Fee	Fec	For Description		
Number 19-2360 (031948-9)		(5) 130	Code 2051	(S) 65	Surcharge - late filing fee or ooth	_	
	1051	50	2052	25	Surcharge - late provisional filing fee or cover	4	
	4	• • •		~	sheet	1	
Deposit Account Nixon Peabody LLP	1053	130	1053	130	Non-English specification	7	
Name 14 Month 1 Cabody LDA	1812	2,520	1812	2,520	For filing a request for an parte reexamination	1	
The Commissioner is authorized to: (check all that apply)		920*	1804	920*	Requesting publication of SIR prior to Examiner action	1	
Charge fee(s) indicated below Credit any overpayments	1805	1,840*	1805	1,840*	Requesting publication of SIR after Examiner	1	
Charge my additional foc(s)	1251	120	2251	60	Extension for reply within first month	1	
Charge fed(s) indicated below, except for the filling fee	1252	450	2252	225	Extension for reply within 2nd month	-1	
to the above-identified deposit account.	1253	1,020	2253	510	Extension for reply within third month	4	
FEE CALCULATION	1254	1,590	2254	795		-{	
1. BASIC FILING FEE	1255	-	2255		Extension for reply within fourth month	4	
Large Emity Small Entity		2,160		1,080	Extension for reply within fifth month	4	
Fee For For Fee Fee Description	1401	500	2401	250	Notice of Appeal	╛	
Code (S) Code (S) Fee Paid	1402	500	2402	250	Filing a brief in support of an appeal 500,00		
	1403	1,000	2403	500	Request for oral hearing]	
1001 300 2001 150 Utility filing fee	1451	1,510	1451	1,510	Petition to institute a public use proceeding	7	
1002 200 2002 100 Design filing fee	1452	500	2452	250	Petition to revive - unavoidable	7	
1003 200 2003 100 Plant filing fee	1453	1,500	2453	750	Petition to revive - unintentional]	
1004 300 2004 150 Reissue filing fee	1501	1.400	2501	700	Utility issue fee (or reissue)]	
1005 200 2005 100 Provisional filing fee	1502	800	2502	400	Design issue fee	7	
	1503	1,100	2503	550	Plant issue fee]	
SUBTOTAL (I) (\$) 0		130	1460	130	Petitions to the Commissioner	7	
		50	1807	50	Processing fee under 37 CFR 1.17(q)	1	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1806	180	1806	180	Submission of Information Disclosure Stmt	7	
Fee from		40	8021	40	Recording each patent assignment per property	7	
Extra Claims below Fee Paid Total Claims -20** : X - 0	1809	790	2809	395	(times number of properties) Filing a submission after final rejection	1	
Independent -3** = X - 0		790	2810	395	(37 CFR 1.129(a)) For each additional invention to be examined	-	
Ctaims Multiple Dependent X - 0	1801	7 9 0	2801	395	(37 CFR 1.129(b)) Request for Continued Examination (RCE)	-	
· — —	j					4	
Large Entity Small Entity Fee Fee Fee Fee Fee Fee Description	1802	900	1802	900	Request for expedited examination of a design application	1	
Code (5) Code (5)	Other	fee (specif	r N			1	
1202 50 2202 25 Claims in excess of 20	O.L.	oo (.pcor.	<i>'''</i> —			J	
1201 200 2201 100 Independent claims in excess of 3	1			. F., B./4		7	
1203 360 2203 180 Multiple dependent claim, if not paid	Kedu	*Reduced by Basic Filing Fee Paid SUBTOTAL (3)			SUBTOTAL (3) (3)590.00	J	
1204 200 2204 100 ** Reissue independent claims over	1						
original patent	CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]					г	
1205 50 2205 25 "Reissue claims in excess of 20 and	1 her	I hereby certify that this correspondence is being:					
over original patem					United States Postal Service on the date shown below with sufficient is mail in an envelope addressed to: Mail Stop		
SUBTOTAL (2) (\$) 0					Patents, P. O. Box 1450, Alexandria, VA 22313-1450		
**or number previously paid, if greater; For Reissues, see above					imile on the date shown below to the United States Patent and		
					1 (571) 273-8300. Wy oly Derly well:		
		October D:	<u>. 2, 2006</u> ste		Signature		
		2,			Michelle Duvall		
		Typed or printed name					
SUBMITTED BY					Complete (if applicable)		
Name (Print/Type) Luan G. Do	Regist	ration No	0.	38,434	Telephone (202) 585-8000	ヿ	

(Attorney/Agent)